

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 07/12/2016
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345505	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED C 06/10/2016
NAME OF PROVIDER OR SUPPLIER CAROLINA REHAB CENTER OF CUMBERLAND			STREET ADDRESS, CITY, STATE, ZIP CODE 4600 CUMBERLAND ROAD FAYETTEVILLE, NC 28306		
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F 157 SS=D	<p>483.10(b)(11) NOTIFY OF CHANGES (INJURY/DECLINE/ROOM, ETC)</p> <p>A facility must immediately inform the resident; consult with the resident's physician; and if known, notify the resident's legal representative or an interested family member when there is an accident involving the resident which results in injury and has the potential for requiring physician intervention; a significant change in the resident's physical, mental, or psychosocial status (i.e., a deterioration in health, mental, or psychosocial status in either life threatening conditions or clinical complications); a need to alter treatment significantly (i.e., a need to discontinue an existing form of treatment due to adverse consequences, or to commence a new form of treatment); or a decision to transfer or discharge the resident from the facility as specified in §483.12(a).</p> <p>The facility must also promptly notify the resident and, if known, the resident's legal representative or interested family member when there is a change in room or roommate assignment as specified in §483.15(e)(2); or a change in resident rights under Federal or State law or regulations as specified in paragraph (b)(1) of this section.</p> <p>The facility must record and periodically update the address and phone number of the resident's legal representative or interested family member.</p> <p>This REQUIREMENT is not met as evidenced by: Based on record review and staff interviews, the facility failed to notify the legal representative of a change in condition for 1 of 1 sampled resident.</p>	F 157	The Statements included are not an admission and do not constitute agreement with the alleged deficiencies	7/8/16	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Electronically Signed

06/27/2016

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 157	<p>Continued From page 1</p> <p>The facility also failed to update a legal representative address for 1 of 1 sampled resident.(Resident # 1) Findings included:</p> <p>A-Resident was admitted to the facility on 6/2/2016 with diagnosis of Dementia with behavioral disturbance, Psychosis, Type 2 diabetes mellitus without complication, Hypertension, Gastro-esophageal reflux disease with esophagitis, history of falling, other Alzheimer ' s disease, Insomnia, Major depressive disorder and anxiety.</p> <p>Nurse's note dated 5/22/2016 documented " Family in voiced concerns that no one has been taking patients Vital Signs (VS) since she arrived here. Explained to the family yes they were taken and Nurse Aide just took the VS 148/98, 110, 96.8, saturation 62 %. Family believes she is dehydrated and it ' s in humane. (The doctor) updated and he states the patient is terminal but a full code to send her to the emergency room for change in condition. 911 called and family updated. "</p> <p>Review of the guardianship paperwork revealed the DSS (Department of Social Services) Social Worker had been appointed as a guardian on 5/3/2016.</p> <p>During the interview with the Social Worker (SW) on 6/9/2016 at 11:00 AM, she reported that the resident's guardian name was not documented on the resident's medical record when she was first admitted to the facility. She added the resident guardian ' s name was added on the face shift after the resident was admitted to the facility for the second time.</p> <p>During the interview with the Admission Coordinator on 6/9/2016 at 2:00 PM, she reported that the guardian for Resident # 1 was the DSS</p>	F 157	<p>herein. The plan of correction is completed in the compliance of state and federal regulations as outlined. To remain in compliance with all federal and state regulations the center has taken or will take the actions set forth in the following plan of correction.</p> <p>How corrective action will be accomplished for those residents found to have been affected by the deficient practice; Resident #1 <input type="checkbox"/>s legal representative <input type="checkbox"/>s contact was verified and updated in resident #1 <input type="checkbox"/>s record. 6/09/2016</p> <p>How corrective action will be accomplished for those residents having potential to be affected by the same deficient practice; All residents <input type="checkbox"/> representative/legal representative contact information was verified for accuracy. 07/08/2016 All licensed nurses in-serviced on Policy #2002 Significant Change of Condition #4, Responsible party will be notified of change of condition. 07/08/2016 All newly hired licensed nurses will be in-serviced, during orientation on Policy #2002 Significant Change of Condition #4, Responsible party will be notified of change of condition. All licensed Nursing staff and department managers in-serviced to notify the admissions department of any change in resident representative/legal representative contact information. 07/08/2016 What measures will be put into place or</p>		

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F 157	<p>Continued From page 2</p> <p>social worker and she had signed the resident's admission paper work on 5/6/2016. The Admission Coordinator was asked why the name of the resident ' s guardian was not included on the resident's face sheet during the resident ' s first admission to the facility. She answered that she had given the information to the medical records staff member and had no idea why the name was not included on the face sheet. During the interview with the Medical Records staff member on 6/9/2016 at 2:30 PM, She reported that she was not made aware by the Admission Coordinator that Resident # 1 had a guardian. She added if she knew that the resident had a guardian then she would have included the name as the first person to be contacted when a change in condition occurred.</p> <p>Interview with Director of Nursing (DON) on 6/9/2016 at 3:00 PM revealed her expectation was for the name of the resident ' s guardian to be included on the face sheet on the day the resident is admitted to the facility.</p> <p>B- Resident was admitted to the facility on 6/2/2016 with diagnosis of Dementia with behavioral disturbance, Psychosis, Type 2 diabetes mellitus without complication, Hypertension, Gastro-esophageal reflux disease with esophagitis, history of falling, other Alzheimer ' s disease, Insomnia, Major depressive disorder and anxiety.</p> <p>Nurse's note dated 5/22/2016 documented " Family in voiced concerns that no one has been taking patients Vital Signs (VS) since she arrived here. Explained to the family yes they were taken and Nurse Aide just took the VS 148/98, 110, 96.8, saturation 62 %. Family believes she is dehydrated and it ' s in humane. (The doctor) updated and he states the patient is terminal but</p>	F 157	<p>systemic changes made to ensure that the deficient practice will not occur; All newly hired licensed nurses will be in-serviced, during orientation on Policy #2002 Significant Change of Condition #4, Responsible party will be notified of change of condition.</p> <p>All new admission contact information will be verified by admissions department on admission to the facility and entered into the medical record. 07/08/2016 All new admission contact information will be reviewed by the interdisciplinary team in morning meeting. 07/08/2016 Any updates for resident representative/legal representative contact information will be communicated to the admissions department to update in the resident's record. 07/08/2016 Resident representative/legal representative contact information will be reviewed during the care plan meeting quarterly. 07/08/2016</p> <p>How the facility plans to monitor its performance to make sure that solutions are sustained; Results of resident representative/legal representative verification sheets will be reviewed in the Quality Assurance meeting monthly x 3 months, then quarterly x 3 quarters, and as needed. 07/08/2016</p>		

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F 157	<p>Continued From page 3</p> <p>a full code to send her to the emergency room for change in condition. 911 called and family updated. "</p> <p>Review of the guardianship paperwork revealed the DSS (Department of Social Services) Social Worker had been appointed as a guardian on 5/3/2016.</p> <p>During the interview with the Social Worker (SW) on 6/9/2016 at 11:00 AM, she reported that the resident's guardian name was not documented on the resident's medical record when she was first admitted to the facility. She added the resident guardian ' s name was added on the face shift after the resident was admitted to the facility for the second time.</p> <p>During the interview with the Admission Coordinator on 6/9/2016 at 2:00 PM, she reported that the guardian for Resident # 1 was the DSS social worker and she had signed the resident's admission paper work on 5/6/2016. The Admission Coordinator was asked why the name of the resident ' s guardian was not included on the resident ' s face sheet during the resident ' s first admission to the facility. She answered that she had given the information to the medical records staff member and had no idea why the name was not included on the face sheet.</p> <p>During the interview with the Medical Records staff member on 6/9/2016 at 2:30 PM, She reported that she was not made aware by the Admission Coordinator that Resident # 1 had a guardian. She added if she knew that the resident had a guardian then she would have included the name as the first person to be contacted when a change in condition occurred.</p> <p>Interview with the Director of Nursing (DON) on 6/9/2016 at 3:00 PM revealed her expectation was for the name of the resident ' s guardian to be included on the face sheet on the day the</p>	F 157			

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F 157	Continued From page 4 resident is admitted to the facility.	F 157			